# **CHAPTER 7**

#### SECTION 8 OCCUPATIONAL IMMUNIZATION HEALTH PROGRAM

### 7.8.1 PURPOSE

This section supplements the immunization health program found in Section 7.2.7, gives responsibility to the senior line manager to ensure that guidelines for immunizations are made available to supervisors and employees, and states the guidelines for an Occupational Immunization Health Program.

### 7.8.2 BACKGROUND

Many APHIS employees are required to travel outside the United States. Immunization requirements for international travel have been eased in recent years; however, there is an increasing need to follow U.S. State Department recommendations that go beyond what is required. Recommendations cannot be standardized since employees in remote areas face different risks from those staying in a hotel in the city.

Other APHIS employees work with animals that may be infected with diseases transmittable to humans. Also, others are exposed to diseases while engaged in inspections at ports of entry and quarantine stations. Employees can be immunized against many of these diseases.

### 7.8.3 RESPONSIBILITIES

- A. The responsibility for establishing and maintaining an Occupational Immunization Health Program (OIHP) in the field will be with the senior line manager at a region or at an emergency or special project, e.g., Regional Directors, Project Leaders, Emergency Program Coordinators, and Laboratory Directors. These managers may delegate in writing the operation of the program as described in Chapter 2.
- B. Supervisors will review all requests from employees for participation in this health program and approve the requests using APHIS Form 29, Supervisor's Request for Health Monitoring. Supervisors should base their decision on the employee's possible exposure to a disease, using the requirements and guidelines stated in this Section.
- C. International Services (IS) will be responsible for maintaining current State Department immunization requirements/recommendations and for seeing that employees traveling out of the country are properly immunized.

## 7.8.4 REQUIREMENTS

A. APHIS employees occupationally at risk of exposure to pathogenic agents or animals possibly infected with diseases transmittable to humans will be immunized as a condition of their employment if a Food and Drug Administration (FDA) licensed vaccine (including investigational) is available (e.g., rabies, encephalitis viruses, Rift Valley Fever, Q Fever, anthrax, cowpox). The determination of risk is a supervisory assessment. The OIHP extends to incumbents as well as applicants for a position.

- B. Employees also should be immunized for diseases which are or become endemic to this country if there is a chance of exposure.
- C. Employees engaged in inspection at ports of entry and quarantine stations should receive tetanus boosters every 10 years.
- D. Employees collocated with the Agricultural Research Service (ARS) and working in research or research support activities may be exposed to exotic diseases. Those employees will comply with immunization programs that are specific to the ARS site.
- E. All employees traveling internationally should follow the recommended immunization program provided by IS. All immunizations for foreign travel should be recorded on an International Certificate of Vaccination.
- F. Vaccines will be administered under the supervision of an Agency-designated physician. If the Agency does not choose to designate a physician, employees may select their own. Employees should be encouraged to use U.S. Military, U.S. Public Health Service, Veterans' Affairs, and other Federal, county, or municipal health units for their immunizations. Private physicians may be utilized in locations where such health units do not exist. Vaccines approved for human use by the Food and Drug Administration will be given according to the manufacturer's recommendations. The designated physician will, at a minimum, review the employee's health history for conditions that would contraindicate immunization.

### 7.8.5 PAYMENT

- A. Immunizations authorized by a supervisor may be paid from the same APHIS funds as the employee's salary or from the unit's "all other" account. The fee must be reasonable and not in excess of the normal charge to the general public. Use APHIS Form 29, as outlined in Section 7.3.
- B. Medical examinations incident to the OIHP will be conducted by an Agency-designated physician. The employing unit will pay costs associated with obtaining medical examinations or documentation required by the program, including reasonable transportation costs when the physician or practitioner is located outside the individual's normal commuting area. This includes payment for pre-exposure examinations and periodic examinations required for positions with specific medical standards.

### 7.8.6 COMPENSATION, ACCOMMODATION, AND PRIVACY

- A. Employees are authorized all necessary medical care for injury or illness which is the result of their participation in the OIHP under the provisions of 5 CFR Part 339.301 and the Federal Employees' Compensation Act.
- B. Employees who are found, as a result of medical examinations, to be unable to receive immunization may be excluded from exposure to those pathogenic agents or animals that

may cause infection in humans. In such cases, appropriate action will be taken to ensure that the employee is not exposed.

C. Individual employees' medical information resulting from participation in the OIHP will be protected under the provisions of the Privacy Act.

# 7.8.7 ADDITIONAL INFORMATION

A good reference is the most recent edition of "Foreign Travel and Immunization Guide," Hans H. Neumann, M.D., Medical Economics Books, Oradell, New Jersey 07649. Any questions or comments concerning the OIHP should be referred to the Safety, Health, and Environmental Staff. Questions regarding international travel and immunization requirements should be directed to IS.